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801.01 GENERAL

a. The NPTF (New Patient Treatment File) System has been developed with the concept of accepting and retaining data that meets edit specifications. It is important to determine whether or not the transaction has been accepted. A transaction will be accepted providing:

(1) It contains valid and consistent Control Data (social security number, date and time of admission, and facility number);

(2) It has the appropriate transaction type code; and,

(3) There are no edit or error conditions in the remaining portion of the transaction.

b. Analysis and review of all edit code messages in the right margin of EAL (Edit Analysis Listing) for the transaction, will provide information as to the data accepted or rejected.

c. A maximum of five edit conditions is permitted in any given transaction before processing is terminated. When the computer encounters a total of six unacceptable edit conditions for one transaction, a code 999 is issued and the transaction is rejected.

801.02 TPL (TRANSACTIONS PROCESSED LISTING)

a. Each facility will receive a TPL. This listing will show the disposition of the transactions submitted. There are five possible dispositions: Accepted, Rejected, Pending, Wrapped and Deleted.

(1) Accepted transactions will appear on the TPL without any notation.

(2) Rejected transactions will carry the notation "Rejected" and will also appear on the EAL.

(3) Transactions that carry the notation "Pending" means there was not enough information to establish a master record and the valid data is being retained for processing in the next cycle. The system is expecting more data.

(4) A transaction with the notation "Wrapped" means that the transaction has had the control data changed (probably social security number) and it will be processed in the next weekly cycle. The facility does not have to do anything. This just tells the facility that a change has been received and it will be processed.

(5) A transaction with the notation "Deleted" means that the record has been dropped from the file either as a result of an "099 Deletion Transaction" initiated by the facility or the record has been dropped because 120 days have

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passed without submission (resubmission) of data necessary to create a master record.

b. The TPL is a composite printout or listing for a reporting facility, of all transactions (accepted and rejected) for the processing cycle.

(1) Transactions for a given master record in the processing cycle are listed in transaction type code sequence.

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(2) Three print lines are devoted to each transaction.

(a) The first line contains abbreviated headings for data fields in the particular transaction.

(b) The second line displays the content of the transaction exactly as submitted by the reporting facility. Applicable edit codes appear in the right margin parallel to the transaction.

(c) The third line will contain a symbol beneath the data field that did not pass edit specification, plus information indicating the reason for producing a RPO (record printout) (see par. 801.04).

c. These symbols correlate to the codes:

(1) An asterisk (*) indicates the entry contained an invalid code, and

(2) A pound sign (#) indicates the entry is inconsistent with other data in the transaction(s) and or master record.

801.03 MASTER RECORD/PENDING FILE

a. A NPTF master record will be created only when the record is error free.

b. If some transactions for a period of care are error free while other transactions for the veteran's episode of care are found to have errors, the transactions that are error free are retained in a "Pending File" until the transaction in error is correctly resubmitted. Records held in the pending file will appear on the "Transactions Processed Listing" with the notation that the record is pending and the date the transaction was put on the pending file.

c. Records will remain on the pending file for 120 days. If no corrective action has been taken in this period of time, the record will be dropped from the pending file. The Transactions Processed Listing will show those records that have been deleted. They will carry the notation "Deleted."

801.04 RPO (RECORD PRINTOUT)

a. A RPO displays the current coded data content of an individual master record in the system for a treatment episode. As an output of processing, it is a tool to resolve data that failed a consistency edit. It permits the user to compare stored data with current input. If a record printout has been produced, "RPO" appears on EAL under the error codes of the applicable transaction in the right margin on the third line. As a result of edit processing for a cycle, only one RPO is produced for a master record even though "RPO" may be referenced for more than one transaction.

b. A reporting facility can initiate a request for a RPO and the method is outlined under "RPO-Request." Should such a request be processed in the same cycle in which one was generated, the facility will receive two record printouts for the record.

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c. "Reason codes" that appear in the upper portion of the RPO provide a reference to determine why the document was provided.

Reason

Code Definition

ERROR = RPO produced because of edit condition.

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REQST =
RPO produced by means of transaction request.
INFO =

801.05 EDIT TABLES

a. An edit is a computer check to determine that input is correct. This is done by programming in the computer. The acceptable codes for each category of care have been written into edit tables. The facility number in each transaction is checked with a facility number edit table.

b. This table contains and identifies the code of each reporting facility that supplies input and the category of care that is reportable from that activity. Based on category of care identified by the complete facility number in the transaction, edit tables for the category are used to check or edit input. If the code in the facility number item does not match any code in the facility number edit table, the transaction will be rejected, as the computer cannot select the appropriate edit table.

801.06 TYPES OF EDIT

a. Validity Edit. This edit checks to determine that the code entered for the item, is an acceptable code for the transaction and category of care. The symbol indicator (*) asterisk will appear on outputs to indicate an invalid code.

b. Consistency Edit. This edit compares data in related items, to determine that they are consistent and acceptable for the category of care. The symbol indicator (#) pound sign will appear on outputs to denote an inconsistent code.

801.07 SEQUENCE OF EDITS

a. For processing, all transactions are sorted by social security number, date and time of admission, station number, and transaction type code. Transactions are edited separately and in numerical sequence. First, the data content within the transaction itself is edited and next, it is edited against data that has been stored on other transactions for the treatment episode. If all the data in the transactions meets edit conditions, a master record is created.

b. The sequence is as follows:

- (1) A validity edit of the data content within the transaction.
- (2) A consistency edit of the data content within the transaction itself.

(3) If errors occur in subparagraphs b(1) or b(2), the transaction is rejected.

801.08 INVALID CODES AND CONSISTENCY EDITS

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A consistency edit cannot be completed, if any entry that is part of the edit, contains an invalid code. The EAL will show the asterisk (*) below the invalid code(s).

801.09 MODIFIED EDIT SYMBOLS FOR THE DISPOSITION TRANSACTION

a. The NPTF System has been developed with the concept of accepting and retaining data that meets edit specifications. It is important to determine whether or not the transaction has been accepted.

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b. A transaction will be accepted providing it:

(1) Contains valid and consistent data in Control Data as Social Security Number, station number, and date of admission,

(2) Has the appropriate transaction type code, and

(3) There are no edit or error conditions in the remaining portion of the transaction.

c. An analysis and review of all of the edit code messages in the right margin of the EAL for the transaction will provide information on what data was rejected.

801.10 ENTIRE TRANSACTION REJECTED

a. If the transaction has been rejected, the data content that caused its rejection should be corrected, and the transaction type code indicating the purpose of the original intended action will be used.

b. NONE of the original input for this transaction has been stored.

801.11 REPLACEMENT OF ACCEPTED STORED DATA IN A MASTER RECORD

a. Submission of a N101 (Admission Transaction) will delete all existing records (master and pending) for a record with the same control data.

b. All data submitted for replacement purpose in a transaction must meet edit conditions or none will be accepted, and the content of the master record will remain unaltered.

801.12 DELETION OF MASTER RECORD

a. Due to errors in reporting there may be a need to delete an established master record or component segments of a record. A deletion action will be used only when the record cannot be adjusted by using a replacement action.

b. The need to delete the content of an existing master record may result when:

(1) The facility number has been incorrectly identified; or

(2) An admission was reported, but actually did not take place (admission canceled).

c. Transaction type "N099" will remove the complete existing content of a master record that has been established in the NPTF system. In addition to the transaction type, this transaction requires control data, (SSN (Social Security Number), date and time of admission, and facility number) that will be identical to the data that established the master record. If the time and date of admission are not known, zeroes should be entered.

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 801.13 NPTF TRANSMISSION FORMAT

When a data element is not required for a particular type of discharge, (i.e., hospital, nursing home care, etc.) the EAL and TPL will contain spaces. To allow facilities to identify the placement of errors in the transmission types, the following list contains the transaction types and the placement of each data element.

Control Data Information - All Transactions

Format	
Placement	Data
5-14	Social Security Number
15-20	Date of Admission
21-24	Time of Admission
25-27	Facility Number
28-30	Facility Suffix

N101 - NPTF Admission Transaction

Format	
Placement	Data
1-4	Transaction Type (N101)
5-30	Control Data Information
31-42	Patient's Last Name
43-44	Patient's First Initial and Middle Initial
45-46	Source of Admission
47-49	Transferring Facility Number
50-52	Transferring Facility Suffix
53	Source of Payment
54	Prisoner of War Status
55	Marital Status
56	Sex Indicator
57-64	Date of Birth, Example March 27, 1947-03271947
65	Space
66	Period of Service
67	Agent Orange Exposure Indicator
68	Ionizing Radiation Exposure Indicator
69-70	State of Residence
71-73	County of Residence
74-78	ZIP Code
79-80	Means Test Indicator
81-86	Income
87-125	Reserved

N501 - NPTF Patient Movement and Discharge Diagnosis Transaction

Format	
Placement	Data

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1-4	Transaction Type (N501)
5-30	Control Data Information
31-36	Date of Movement
37-40	Time of Movement
41-46	Specialty CDR (Cost Distribution Report) Code
47-48	Specialty Code
49-51	Leave Days
52-54	Pass Days
55	Spinal Cord Injury Indicator
56-62	DXLS for the Losing Bed Section
63-69	Diagnostic Code Number 2
70-76	Diagnostic Code Number 3
77-83	Diagnostic Code Number 4
84-90	Diagnostic Code Number 5
91-99	NOT ACTIVATED - Contains Spaces
100-105	Physical Location CDR Code
106-107	Physical Location Code
108	Bed Status (Discharge Movement Only)
109	Legionnaire's Disease Indicator
110	Suicide Indicator
111-114	Substance Abuse Information
115	Psychiatry AXIS IV
116-119	Psychiatry AXIS V
120	Treated for SC (service-connected) Condition Indicator
121-125	Reserved

N535 - NPTF Physical Location Movement Transaction

Format
Placement Data

1-4	Transaction Type (N535)
5-30	Control Data Information
31-36	Date of Movement
37-40	Time of Movement
41-46	Physical Location CDR Code
47-48	Physical Location Code
49-54	Specialty CDR Code
55-56	Specialty Code
57-59	Leave Days
60-62	Pass Days
63-71	NOT ACTIVATED - Contains Spaces
72-125	Reserved

N401 - NPTF Surgical Procedures Transaction

Format
Placement Data

1-4	Transaction Type (N401)
5-30	Control Data Information
31-36	Date of Surgery

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37-40	Time of Surgery
41-42	Specialty
43	Category of Chief Surgeon
44	Category of First Assistant
45	Anesthesia Technique (Principal)
46	Source of Payment
47-53	Operation Code #1
54-60	Operation Code #2
61-67	Operation Code #3
68-74	Operation Code #4
75-81	Operation Code #5
82-90	NOT ACTIVATED - Contains Spaces
91	Kidney Transplant Status Indicator
92-125	Reserved
	N601 - NPTF Non-surgical Procedures Transaction

Format

Placement Data

1-4	Transaction Type (N601)
5-30	Control Data Information
31-36	Date of Procedure
37-40	Time of Procedure
41-42	Specialty
43	Dialysis Type
44-46	Number of Dialysis Treatments
47-53	Procedure Code #1
54-60	Procedure Code #2
61-67	Procedure Code #3
68-74	Procedure Code #4
75-81	Procedure Code #5
82-125	Reserved

N701 - NPTF Disposition Transaction

Format

Placement Data

1-4	Transaction Type (N701)
5-30	Control Data Information
31-36	Date of Disposition
37-40	Time of Disposition
41-42	Discharge Specialty Code
43	Type of Disposition
44	Outpatient Care Status
45	Under VA Auspices
46	Place of Disposition
47-49	Receiving Facility Number
50-52	Receiving Facility Suffix
53-55	Extended Care Days ASIH (Absent Sick in Hospital)
56	Race
57	Compensation and Pension Status

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58-64	DXLS (Diagnosis Responsible for Length of Stay) For Entire Stay
65	Only Diagnosis Indicator
66-71	Physical Location CDR Code
72-73	Physical Location Code
74-76	Percentage of Service Connection
77	Legionnaire's Disease Indicator
78	Suicide Indicator
79-82	Substance Abuse Information
83	Psychiatry AXIS IV
84-87	Psychiatry AXIS V
88	Treated for SC Condition Indicator
89-125	Reserved

N702 - NPTF Disposition Transaction

Format

Placement Data

1-4	Transaction Type (N702)
5-30	Control Data Information
31-36	Date of Discharge
37-40	Time of Discharge
41-47	Diagnosis Code #2
48-54	Diagnosis Code #3
55-61	Diagnosis Code #4
62-68	Diagnosis Code #5
69-75	Diagnosis Code #6
76-82	Diagnosis Code #7
83-89	Diagnosis Code #8
90-96	Diagnosis Code #9
97-103	Diagnosis Code #10
104-125	Reserved